

ISSUE SLIP STATEMENT AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION		71530	1/13
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	AH	60245	1/28
RESPONSE FORMALITY REVIEW			5/15/02

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

09/474,043

Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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